Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
NORTHERN DISTRICT OF INDIANA	_	
Case number (if known)	Chapter you are filing under:	
	☐ Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	Donald First name Robert Middle name Hammon Last name and Suffix (Sr., Jr., II, III)	Paula First name Jo Middle name Hammon Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-4584	xxx-xx-2032

	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names	I have not used any business name or EINs. Business name(s)	■ I have not used any business name or EINs. Business name(s)
	LINS	LINS
Where you live	1305 Grass Creek Court	If Debtor 2 lives at a different address:
	Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
	Porter	
	County	County
	If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
	Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
Why you are choosing this district to file for bankruptcy	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. □ I have another reason. Explain. (See 28 U.S.C. § 1408.)
	Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Where you live Why you are choosing this district to file for	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names Business name(s) EINs ### 1305 Grass Creek Court Valparaiso, IN 46383 Number, Street, City, State & ZIP Code Porter County If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. Number, P.O. Box, Street, City, State & ZIP Code Why you are choosing this district to file for bankruptcy Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason.

_	otor 1 otor 2	Donald Robert Ha Paula Jo Hammon		on				Case	number (if known)	
Par	t 2:	Tell the Court About \	You	r Bank	ruptcy Ca	se				
7.	Bank	chapter of the cruptcy Code you are				rief description of each, see a go to the top of page 1 and c			.C. § 342(b) for Individu	uals Filing for Bankruptcy
	choc	sing to file under		Chapt	ter 7					
				Chapt	ter 11					
				Chapt	ter 12					
				Chapt	ter 13					
8.	How	you will pay the fee		abo ord	out how yo	entire fee when I file my pe u may pay. Typically, if you a attorney is submitting your pa address.	re paying	the fee yourself,	you may pay with cash	n, cashier's check, or money
						the fee in installments. If ye in Installments (Official Form		e this option, sigr	n and attach the Applica	ation for Individuals to Pay
				l re but app	equest that is not requ plies to you	t my fee be waived (You ma	y request may do so able to pa	o only if your inco y the fee in instal	ome is less than 150% of lments). If you choose	of the official poverty line that this option, you must fill out
9.	bank	you filed for ruptcy within the 3 years?		No. Yes.						
					District	Northern District of Indiana Hammond Division	When	6/30/11	Case number	11-22548
					District	Division	_ When		Case number	
					District		When		Case number	
10.	case filed not f you,	any bankruptcy s pending or being by a spouse who is iling this case with or by a business ner, or by an ate?		No Yes.						
					Debtor				Relationship to y	/ou
					District		When		Case number, if	known
					Debtor				Relationship to y	
					District		_ When		Case number, if	known
11.		ou rent your lence?		No.	Go to li	ne 12.				
	iesit			Yes.	Has yo	ur landlord obtained an evicti	on judgm	ent against you?		
						No. Go to line 12.				
						Yes. Fill out <i>Initial Statement</i> this bankruptcy petition.	t About ar	n Eviction Judgm	ent Against You (Form	101A) and file it as part of

	otor 2 Paula Jo Hammor				Case number (if known)
Par	t 3: Report About Any Bu	ısinesses	You Owr	ı as a Sole Proprie	ietor
12.	Are you a sole proprietor of any full- or part-time business?	■ No.	Go to	Part 4.	
		☐ Yes.	Name	and location of bus	usiness
	A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.			e of business, if any	
	If you have more than one sole proprietorship, use a separate sheet and attach		Numb	per, Street, City, Star	tate & ZIP Code
	it to this petition.		Chec	k the appropriate bo	box to describe your business:
	·				siness (as defined in 11 U.S.C. § 101(27A))
				Single Asset Rea	eal Estate (as defined in 11 U.S.C. § 101(51B))
				Stockbroker (as d	defined in 11 U.S.C. § 101(53A))
				Commodity Broke	ker (as defined in 11 U.S.C. § 101(6))
				None of the above	
13.	Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?	deadline operation	s. If you ir ns, cash-f s.C. 1116	ndicate that you are low statement, and f(1)(B).	e court must know whether you are a small business debtor so that it can set appropriate to a small business debtor, you must attach your most recent balance sheet, statement of d federal income tax return or if any of these documents do not exist, follow the procedure
	For a definition of small	No.	I am i	not filing under Chap	apter 11.
	business debtor, see 11 U.S.C. § 101(51D).	□ No.	I am f Code		er 11, but I am NOT a small business debtor according to the definition in the Bankruptcy
		☐ Yes.	I am f	iling under Chapter	er 11 and I am a small business debtor according to the definition in the Bankruptcy Code.
Par	t 4: Report if You Own or	· Have Any	Hazardo	ous Property or An	Any Property That Needs Immediate Attention
14.	Do you own or have any	■ No.			
	property that poses or is alleged to pose a threat of imminent and	Yes.	What is	the hazard?	
	identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?			diate attention is why is it needed?	
	For example, do you own perishable goods, or livestock that must be fed,			s the property?	
	or a building that needs urgent repairs?				No. 1. Control of the
					Number, Street, City, State & Zip Code

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

	otor 1 otor 2	Donald Robert Ha Paula Jo Hammon				Case nu	umber (if known)
Par	t 6:	Answer These Questi	ions for R	eporting Purposes			
16.		t kind of debts do have?	16a.	Are your debts primarily condividual primarily for a pers			e defined in 11 U.S.C. § 101(8) as "incurred by an
				☐ No. Go to line 16b.			
				Yes. Go to line 17.			
			16b.	Are your debts primarily b money for a business or inve			lebts that you incurred to obtain e business or investment.
				☐ No. Go to line 16c.			
				☐ Yes. Go to line 17.			
			16c.	State the type of debts you o	owe that are not consumer of	debts or bus	siness debts
17.		you filing under pter 7?	■ No.	I am not filing under Chapter	r 7. Go to line 18.		
	afte	you estimate that r any exempt perty is excluded and	☐ Yes.	I am filing under Chapter 7. are paid that funds will be av			property is excluded and administrative expenses litors?
	adm	inistrative expenses paid that funds will		□ No			
	be a dist	vailable for ribution to unsecured litors?		Yes			
18.		many Creditors do	1 -49		1 ,000-5,000		2 5,001-50,000
	you owe	estimate that you ?	□ 50-99		☐ 5001-10,000 ☐ 10,001.05.000		☐ 50,001-100,000
			☐ 100-1 ☐ 200-9		☐ 10,001-25,000		☐ More than100,000
19.		much do you mate your assets to	□ \$0 - \$	'	□ \$1,000,001 - \$10		□ \$500,000,001 - \$1 billion
		orth?		01 - \$100,000	□ \$10,000,001 - \$5 □ \$50,000,001 - \$1		□ \$1,000,000,001 - \$10 billion □ \$10,000,000,001 - \$50 billion
				001 - \$500,000 001 - \$1 million	□ \$100,000,001 - \$		
20.		much do you	□ \$0 - \$	•	□ \$1,000,001 - \$10		□ \$500,000,001 - \$1 billion
	to b	mate your liabilities e?		001 - \$100,000	□ \$10,000,001 - \$5 □ \$50,000,001 - \$1		☐ \$1,000,000,001 - \$10 billion ☐ \$10,000,000,001 - \$50 billion
				001 - \$500,000 001 - \$1 million	□ \$50,000,001 - \$1 □ \$100,000,001 - \$		
Par	t 7:	Sign Below					
	you	Oigh Below	I have ev	vamined this petition, and I de	clare under penalty of periu	ny that the i	information provided is true and correct.
. 0.	you		If I have	chosen to file under Chapter 7	7, I am aware that I may pro	oceed, if elig	gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7.
				rney represents me and I did nt, I have obtained and read th			is not an attorney to help me fill out this b).
			I request	relief in accordance with the	chapter of title 11, United St	tates Code,	e, specified in this petition.
			I underst bankrupt and 357	cy case can result in fines up	t, concealing property, or ob to \$250,000, or imprisonme	etaining mor ent for up to	ney or property by fraud in connection with a co 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519
				ald Robert Hammon			Hammon
				Robert Hammon e of Debtor 1		ula Jo Ha nature of D	
			Executed	d on June 27, 2019	Exe	ecuted on	June 27, 2019 MM / DD / YYYY

Debtor 1	Donald Robert Hammon	
Debtor 2	Paula Jo Hammon	Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christopher Schmidgall	Date	June 27, 2019
Signature of Attorney for Debtor	_	MM / DD / YYYY
Christopher Schmidgall		
Printed name		
Law Office of Weiss, Schmidgall & Hires, P.C.		
Firm name		
6 West 73rd Ave		
Merrillville, IN 46410		
Number, Street, City, State & ZIP Code		
Contact phone (219)736-5297	Email address	bankruptcy@wshlegal.com
23738-64 IN		
Bar number & State		

Fill i	Il in this information to identify your case:			
Debt	ebtor 1 Donald Robert Hammon			
	First Name Middle Name	Last Name		
	ebtor 2 Paula Jo Hammon			
(Spou	pouse if, filing) First Name Middle Name	Last Name		
Unite	nited States Bankruptcy Court for the: NORTHERN D	STRICT OF INDIANA		
Case	ase number			
(if kno	known)		_	eck if this is an ended filing
			aiii	lended ming
Off	fficial Form 106Sum			
Sur	ummary of Your Assets and Liabilit	ies and Certain Statistical Information		12/15
		people are filing together, both are equally responsible for		
	ormation. Fill out all of your schedules first; then con ur original forms, you must fill out a new <i>Summary</i> aı	nplete the information on this form. If you are filing amend	ed sche	edules after you file
		id officer the box at the top of this page.		
Part	art 1: Summarize Your Assets			
			You	r assets
			Valu	ie of what you own
1.				400 000 00
	1a. Copy line 55, Total real estate, from Schedule A/B	<u></u>	\$_	400,000.00
	1b. Copy line 62, Total personal property, from Sched	ule A/B	\$_	61,600.00
	1c. Copy line 63, Total of all property on Schedule A/E	3	\$_	461,600.00
Part	art 2: Summarize Your Liabilities			
			-	
				r liabilities ount you owe
2.	Schedule D: Creditors Who Have Claims Secured by	Property (Official Form 106D)		
		claim, at the bottom of the last page of Part 1 of Schedule D	\$ _	411,561.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims	s (Official Form 106E/F)		
		red claims) from line 6e of Schedule E/F	\$_	6,000.00
	3b. Copy the total claims from Part 2 (nonpriority unse	ecured claims) from line 6j of Schedule E/F	\$_	77,159.00
		Your total liabilities	\$	494,720.00
				<u> </u>
Part	art 3: Summarize Your Income and Expenses			
4.		Schedule I	\$_	12,013.00
5.	, ,		\$	4,442.00
Dort	Copy your monthly expenses from line 22c of Schedu		Ψ_	1,112.00
raii	art 4: Answer These Questions for Administrative a	ina Statistical Records		
6.		, or 13? form. Check this box and submit this form to the court with yo	ur other	schedules.
	■ Voc			
7.	■ Yes What kind of debt do you have?			
		nsumer debts are those "incurred by an individual primarily for lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a persoi	nal, family, or
	11003011010 parposo. 11 0.3.0. 8 101(0). Fill out	11100 0 0g 101 statistical purposes. 20 0.0.0. g 103.		

the court with your other schedules.

Official Form 106Sum

Summary of Your As:

Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

15,255.00

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Total o	laim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	6,000.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	13,314.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	19,314.00

	this information							
Debt		onald Robert st Name		Name	Last Name			
Debt	or 2 Pa	aula Jo Hamı	mon					
(Spous	e, if filing) Firs	st Name	Middle	Name	Last Name			
Unite	d States Bankrup	tcy Court for th	e: NORTHER	N DISTE	RICT OF INDIANA			
Case	number							☐ Check if this is ar
								amended filing
Offi	cial Form	106A/B						
Sc	hedule A	VB: Pro	perty					12/15
nform	ation. If more spacer every question.	ce is needed, atta	ach a separate sh	heet to th	married people are filing together, both a nis form. On the top of any additional pag Estate You Own or Have an Interest In			
_	No. Go to Part 2.	property?						
1.1	Yes. Where is the p	,		What	is the property? Check all that apply			
1.1		eek Court	otion	What ■ □	is the property? Check all that apply Single-family home Duplex or multi-unit building Condominium or cooperative	the amount	of any secure	aims or exemptions. Put d claims on <i>Schedule D:</i> ns Secured by Property.
1.1	Yes. Where is the p 1305 Grass Cre Street address, if availa	eek Court able, or other descrip	46383-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	the amount Creditors W Current val entire prop	of any secure tho Have Clair ue of the erty?	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
1.1	Yes. Where is the p	eek Court able, or other descrip			Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property	the amount Creditors W Current val entire prop	of any secure ho Have Clair ue of the	d claims on Schedule D: ns Secured by Property. Current value of the
1.1	Yes. Where is the p 1305 Grass Cre Street address, if availa	eek Court able, or other descrip	46383-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other	Current val entire prop \$40 Describe th (such as fe	of any secured the Have Clair use of the erty? 0,000.00 ne nature of y	d claims on Schedule D: ns Secured by Property. Current value of the portion you own?
1.1	Yes. Where is the p 1305 Grass Cre Street address, if availa	eek Court able, or other descrip	46383-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare	Current val entire prop \$40 Describe the (such as fe a life estate	of any secured the Have Clair use of the erty? 0,000.00 ne nature of ye imple, tense), if known.	d claims on Schedule D: ms Secured by Property. Current value of the portion you own? \$400,000.00 our ownership interest
1.1	Yes. Where is the p 1305 Grass Cre Street address, if availa	eek Court able, or other descrip	46383-0000		Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one	Current val entire prop \$40 Describe the (such as fe a life estate	of any secured the Have Clair use of the erty? 0,000.00 ne nature of ye imple, tense), if known.	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$400,000.00 our ownership interest ancy by the entireties, or
1.1	Yes. Where is the p	eek Court able, or other descrip	46383-0000	Who H	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	Current val entire prop \$40 Describe th (such as fe a life estate Joint Tel	of any secured the Have Clair use of the erty? 0,000.00 ne nature of ye simple, tender, if known. nants by the if this is communication in the second control of the second c	d claims on Schedule D: ns Secured by Property. Current value of the portion you own? \$400,000.00 our ownership interest ancy by the entireties, or
1.1	Yes. Where is the p 1305 Grass Cre Street address, if availa Valparaiso City Porter	eek Court able, or other descrip	46383-0000	Who i	Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land Investment property Timeshare Other has an interest in the property? Check one Debtor 1 only Debtor 2 only	Current val entire prop \$40 Describe th (such as fe a life estate Joint Tel	of any secured the Have Clair use of the erty? 0,000.00 ne nature of ye simple, tense), if known. nants by the if this is compared the compared t	current value of the portion you own? \$400,000.0 our ownership interest ancy by the entireties

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Part 2: Describe Your Vehicles

Debt				Case number	(if known)	
. Ca	rs, vans,	trucks, tractors, spo	ort utility vehicles, motorcycles			
	Yes					
3.1	Make:	GMC	Who has an interest in the property? Check on			
0.1		Acadia	<u>_</u>	the amo	deduct secured claims or exemption ount of any secured claims Secured by Property? \$19,000.00 \$19 deduct secured claims or exemption ount of any secured claims on Schemers Who Have Claims Secured by Property? Current value portion you on \$24 deduct secured claims or exemption ount of any secured claims or exemption you on \$24,000.00 \$24,000.00 \$24,000.00 \$12 deduct secured claims or exemption ount of any secured claims or exemption ount of any secured claims or exemption ount of any secured claims on Schemers Who Have Claims Secured by Property? Current value portion you on \$12 Current value of the property? \$12,000.00 \$12	
	Year:					, , ,
						Current value of the
				citile	oroperty.	portion you own.
			Check if this is community property (see instructions)		\$19,000.00	\$19,000.00
3.2	Make:	Dodge	Who has an interest in the property? Check on			
	Model:	Who has an interest in the property? Check one Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct secured the amount of any secured representation: Do not deduct sec				
	Debtor 2 Paula Jo Hammon Case					
	Approxin	SMC Debtor 1 only Debtor 2 only Current value of the entire property? Check one Do not deduct secured claims or ex the amount of any secured claims or ex the entire property?	Current value of the portion you own?			
			, ,			
			☐ Check if this is community property		\$24,000.00	\$24,000.00
			(See Instructions)			
3.3	Make:	Harley Davidsor	1 Who has an interest in the property? Check one			
	Model:	Street Glide	Debtor 1 only			
	Year:	2013	Debtor 2 only	Curron	t value of the	Current value of the
	Approxir	nate mileage:	Debtor 1 and Debtor 2 only			portion you own?
	Other inf	formation:	☐ At least one of the debtors and another			
					\$12,000.00	\$12,000.00
Exa	amples: B No				ies	
						\$55,000.00
			•		!	Current value of the portion you own? Do not deduct secured claims or exemptions.
	<i>(amples:</i> No	Major appliances, furr				
		wash	er, dryer, beds, dressers, dining room table, cha			\$4,000.0
		pans,	and dishes.]	⊅4,000.0

Debtor :		Case number (if known)
	ronics mples: Televisions and radios: audio, video, stereo, and digital equip	ment; computers, printers, scanners; music collections; electronic devices
	including cell phones, cameras, media players, games	,,, ,
□ N	o es. Describe	
_ ''		
	Television, computer, and cell phones	\$1,000.0
	ectibles of value mples: Antiques and figurines; paintings, prints, or other artwork; boo other collections, memorabilia, collectibles	ks, pictures, or other art objects; stamp, coin, or baseball card collections;
■ N	o es. Describe	
	musical instruments	picycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools;
· ·	es. Describe	
10. Fire	arms	
Exa	amples: Pistols, rifles, shotguns, ammunition, and related equipment	
■ N	o es. Describe	
11. Clo t <i>Ext</i> □ N	amples: Everyday clothes, furs, leather coats, designer wear, shoes,	accessories
■ Ye	es. Describe	
	Miscellaneous clothing	\$600.0
12. Jew <i>Exa</i> □ N	amples: Everyday jewelry, costume jewelry, engagement rings, wedd	ling rings, heirloom jewelry, watches, gems, gold, silver
■ Ye	es. Describe	
	Miscellaneous jewelry including wedd	ing rings \$500.0
Exa		
■ Ye	es. Describe	
	Pet dog	\$100.0
■ N	_	cluding any health aids you did not list
ШY	es. Give specific information	
	dd the dollar value of all of your entries from Part 3, including ar r Part 3. Write that number here	
Part 4	Describe Your Financial Assets	
	Describe Your Financial Assets own or have any legal or equitable interest in any of the following	ng? Current value of the
•		portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property

De	ebtor 2	Paula Jo Ha		ımon		Case number (if known	wn)
	■ No		-		r home, in a safe depo	sit box, and on hand when you file your p	etition
	Examp				accounts; certificates of unts with the same inst	f deposit; shares in credit unions, brokera itution, list each.	ge houses, and other similar
	□ No ■ Yes				Institution na	ame:	
			17.1.	Checking	Chase Bar	nk	\$400.00
	Examp ■ No			cly traded stocks ent accounts with	brokerage firms, mone	ey market accounts	
	Non-pu		stock and			rporated businesses, including an inte	erest in an LLC, partnership, and
	■ No						
	☐ Yes.	Give specific in		about them me of entity:		% of ownership:	
	Negoti	iable instrument	ts include	personal checks,	cashiers' checks, pron	gotiable instruments inssory notes, and money orders. by signing or delivering them.	
	☐ Yes.	Give specific in		about them suer name:			
		ment or pensio ples: Interests in			x), 403(b), thrift savings	s accounts, or other pension or profit-shar	ing plans
		List each accou		itely. of account:	Institution na	ame:	
					Retiremen	nt plan with employer USX	Unknown
	Your s		ed deposi	its you have made		inue service or use from a company tric, gas, water), telecommunications com	npanies, or others
					Institution na	ame or individual:	
23.	Annuit	ties (A contract	for a perio	odic payment of m	oney to you, either for	life or for a number of years)	
	■ No □ Yes	I	lssuer nan	ne and description	٦.		
24.	Interest				a qualified ABLE pro	gram, or under a qualified state tuition	program.
	Yes	І	Institution	name and descrip	otion. Separately file the	e records of any interests.11 U.S.C. § 52	1(c):
		, equitable or f	uture inte	erests in property	y (other than anything	g listed in line 1), and rights or powers	exercisable for your benefit
	■ No □ Yes.	Give specific ir	nformation	about them			

	ebtor 1 ebtor 2	Donald Robert Hammon Paula Jo Hammon		Case number (if known)	
26	Exam	s, copyrights, trademarks, trade s oles: Internet domain names, website			
	■ No □ Yes.	Give specific information about the	m		
27	Exam _l ■ No	es, franchises, and other general ples: Building permits, exclusive licer	nses, cooperative association	holdings, liquor licenses, professional license	es
M	oney or	property owed to you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
28	_	unds owed to you			
	■ No □ Yes.	Give specific information about then	n, including whether you alrea	dy filed the returns and the tax years	
29	Examp ■ No	support les: Past due or lump sum alimony, Give specific information	spousal support, child suppor	rt, maintenance, divorce settlement, property	settlement
30	Exam _l ■ No	benefits; unpaid loans you mad		fits, sick pay, vacation pay, workers' compen	sation, Social Security
31		Give specific information ts in insurance policies			
0.			ce; health savings account (H	ISA); credit, homeowner's, or renter's insuran	ce
	☐ Yes.	Name the insurance company of ea Company nar		Beneficiary:	Surrender or refund value:
32	If you some o	terest in property that is due you that the beneficiary of a living trust, end has died. Give specific information	from someone who has died xpect proceeds from a life ins	I urance policy, or are currently entitled to rece	ive property because
33	Exam _l ■ No	against third parties, whether or oles: Accidents, employment dispute			
34			s of every nature, including	counterclaims of the debtor and rights to	set off claims
	■ No □ Yes.	Describe each claim			
35	. Any fir	ancial assets you did not already	list		
		Give specific information			
36				y entries for pages you have attached	\$400.00

Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.

Debt Debt		Donald Robert Hammon Paula Jo Hammon		Case number (if known)	
37. D	o you c	own or have any legal or equitable interest in any business-relat	ed property?		
	No. Go	to Part 6.			
	Yes. G	So to line 38.			
Part		scribe Any Farm- and Commercial Fishing-Related Property You ou own or have an interest in farmland, list it in Part 1.	ı Own or Have an Intere	st In.	
46. C	o you	own or have any legal or equitable interest in any farm-	or commercial fishir	ng-related property?	
	No.	Go to Part 7.			
	☐ Yes.	Go to line 47.			
Part	7:	Describe All Property You Own or Have an Interest in That Yo	u Did Not List Above		
		have other property of any kind you did not already list bles: Season tickets, country club membership	?		
	No No	week estation tionete, searning state mornitorismp			
		Give specific information			
54.	Add t	he dollar value of all of your entries from Part 7. Write th	at number here		\$0.00
Part	B:	List the Totals of Each Part of this Form			
55.	Part 1	: Total real estate, line 2			\$400,000.00
		2: Total vehicles, line 5	\$55,000.00	_	
57.	Part 3	3: Total personal and household items, line 15	\$6,200.00		
58.	Part 4	: Total financial assets, line 36	\$400.00		
59.	Part 5	i: Total business-related property, line 45	\$0.00		
60.	Part 6	: Total farm- and fishing-related property, line 52	\$0.00		
61.	Part 7	': Total other property not listed, line 54 +	\$0.00		
62.	Total	personal property. Add lines 56 through 61	\$61,600.00	Copy personal property total	\$61,600.00
63.	Total	of all property on Schedule A/B. Add line 55 + line 62			\$461,600.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Donald Robert Ha	ammon		
	First Name	Middle Name	Last Name	
Debtor 2	Paula Jo Hammo	n		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF INDIANA	
Case number _				☐ Check if this is an amended filing

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

1.	Which set of exemptions are	you claiming?	? Check one only	, even if	your spouse is filir	ng with	уои.
----	-----------------------------	---------------	------------------	-----------	----------------------	---------	------

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
1305 Grass Creek Court Valparaiso, IN 46383 Porter County Line from <i>Schedule A/B</i> : 1.1	\$400,000.00		\$38,600.00 100% of fair market value, up to	Ind. Code § 34-55-10-2(c)(1)
2015 GMC Acadia Line from Schedule A/B: 3.1	\$19,000.00		any applicable statutory limit \$1,000.00	Ind. Code § 34-55-10-2(c)(2)
Ellie II oli i ochedale 24 B. G. 1			100% of fair market value, up to any applicable statutory limit	
2017 Dodge Ram 1500 Line from Schedule A/B: 3.2	\$24,000.00		\$1,000.00	Ind. Code § 34-55-10-2(c)(2)
Ellie Holli Gonedale 74 B. 412			100% of fair market value, up to any applicable statutory limit	
2013 Harley Davidson Street Glide Line from Schedule A/B: 3.3	\$12,000.00	•	\$2,000.00	Ind. Code § 34-55-10-2(c)(2)
Ellie Holli Goveaule 772. Gio			100% of fair market value, up to any applicable statutory limit	
Miscellaneous household goods including stove, refrigerator, washer,	\$4,000.00		\$4,000.00	Ind. Code § 34-55-10-2(c)(2)
dryer, beds, dressers, dining room table, chairs, pots, pans, and dishes. Line from <i>Schedule A/B</i> : 6.1			100% of fair market value, up to any applicable statutory limit	

Debtor 1 Donald Robert Hammon

Paula Jo Hammon

Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Television, computer, and cell Ind. Code § 34-55-10-2(c)(2) \$1,000.00 \$1,000.00 phones Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit Miscellaneous clothing Ind. Code § 34-55-10-2(c)(2) \$600.00 \$600.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Miscellaneous jewelry including Ind. Code § 34-55-10-2(c)(2) \$500.00 \$500.00 wedding rings Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit Pet dog Ind. Code § 34-55-10-2(c)(2) \$100.00 \$100.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit **Checking: Chase Bank** Ind. Code § 34-55-10-2(c)(3) \$400.00 \$400.00 Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Retirement plan with employer USX Ind. Code § 34-55-10-2(c)(6) ALL Unknown Line from Schedule A/B: 21.1 100% of fair market value, up to any applicable statutory limit Are you claiming a homestead exemption of more than \$170,350? (Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Fill in this inform	ation to identify you	ır case:			
Debtor 1	Donald Robert				
	First Name	Middle Name Last Name			
Debtor 2	Paula Jo Hamm	Middle Name Last Name			
(Spouse if, filing)	First Name	Middle Name Last Name			
United States Ban	kruptcy Court for the	NORTHERN DISTRICT OF INDIANA		-	
Case number					
(if known)				_	if this is an
				ameno	ded filing
Official Form	106D				
		Who Hove Claims Soours	d by Dranaut		4044
schedule i	D: Creditors	Who Have Claims Secure	a by Propert	<u>y</u>	12/15
s needed, copy the		If two married people are filing together, both are e out, number the entries, and attach it to this form. C			
number (if known).	nave claims secured b	v vour proporty?			
			/ab.aa.m.a4bim.m.ala.a.4		
_		his form to the court with your other schedules. Y	rou nave notning eise t	to report on this form.	
Yes. Fill in	all of the information	below.			
Part 1: List All	Secured Claims				
2. List all secured c	laims. If a creditor has	more than one secured claim, list the creditor separatel	Column A	Column B	Column C
		s a particular claim, list the other creditors in Part 2. As ical order according to the creditor's name.	Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
	·	•	value of collateral.	claim	If any
	ıto Finance	Describe the property that secures the claim:	\$19,228.00	\$19,000.00	\$0.00
Creditor's Name		2015 GMC Acadia			
Attn: Bank	runtev				
Po Box 44		As of the date you file, the claim is: Check all that			
	, GA 30160	apply. ☐ Contingent			
Number, Street,	City, State & Zip Code	☐ Unliquidated			
		Disputed			
Who owes the dek	ot? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only		☐ An agreement you made (such as mortgage or se	ecured		
Debtor 2 only		car loan)			
■ Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the	e debtors and another	☐ Judgment lien from a lawsuit			
Check if this cla		Other (including a right to offset)			
	Opened				
	12/18 Last				

4079

Last 4 digits of account number

Active

Date debt was incurred 4/30/19

Debtor	1 Donald Ro			ase number (if known)					
		First Name Middle Name Last Name							
Debtor	Paula Jo H								
	First Name	Middle N	ame Last Name						
F	First Communi	ity/ Deere							
ソソ	Community Fe	•	Describe the property that secures the claim:	\$25,671.00	\$24,000.00	\$0.00			
C	Creditor's Name		2017 Dodge Ram 1500						
A	Attn: Bankrupt	cy							
	Department		As of the date you file, the claim is: Check all that						
	Po Box 339		apply.						
_	Moline, IL 6126		Contingent						
N	lumber, Street, City, S	tate & Zip Code	☐ Unliquidated						
			Disputed						
_	wes the debt? C	heck one.	Nature of lien. Check all that apply.						
_	otor 1 only		An agreement you made (such as mortgage or secu car loan)	red					
☐ Deb	otor 2 only		_ ′						
	otor 1 and Debtor 2	•	☐ Statutory lien (such as tax lien, mechanic's lien)						
	east one of the deb		Usual Judgment lien from a lawsuit						
	eck if this claim re mmunity debt	lates to a	Other (including a right to offset)						
Date de	ebt was incurred	Opened 10/17/17 Last Active 5/29/19	Last 4 digits of account number 0002						
	First Community Fo		Describe the property that secures the claim:	\$10,893.00	\$12,000.00	\$0.00			
	Community Fe Creditor's Name	u Cu	2013 Harley Davidson Street Glide						
	Attn: Bankrupt	cv	2013 Harley Davidson Street Glide						
	Department	Cy							
	Po Box 339		As of the date you file, the claim is: Check all that apply.						
N	Moline, IL 6126	66	☐ Contingent						
N	lumber, Street, City, S	tate & Zip Code	☐ Unliquidated						
			☐ Disputed						
Who o	wes the debt? C	heck one.	Nature of lien. Check all that apply.						
☐ Deb	otor 1 only		☐ An agreement you made (such as mortgage or secu	red					
☐ Deb	otor 2 only		car loan)						
■ Deb	otor 1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)						
☐ At le	east one of the deb	tors and another	☐ Judgment lien from a lawsuit						
	eck if this claim re mmunity debt	lates to a	Other (including a right to offset)						
Date de	ebt was incurred	Opened 8/09/17 Last Active 5/23/19	Last 4 digits of account number 0001						

Debtor 1	Donald Ro	bert Hammor	l		Ca	ase number (if known)				
	First Name	Middle N	ame Last Name							
Debtor 2	Paula Jo H									
	First Name	Middle N	ame Last Name							
124 1	me Point Fi	nanciai	Describe the property that are	aa Aba ala		\$355,769.00	9	\$400,000.00	\$0.00	
	rporation itor's Name		Describe the property that sec			Ψοσο, ι σοισο			Ψ0.00	
		ndonoo	1305 Grass Creek Cour	•	iso,					
	n: Correspo	maence	IN 46383 Porter County	/						
Dep 115	อเ 511 Luna Ro	ad: Suita	As of the date you file, the cla	im is: Check	all that					
200		Jau, Juile	apply.							
	mers Brand	sh TY	☐ Contingent							
752		, I A								
	ber, Street, City, S	itate & Zin Code	☐ Unliquidated							
	201, 211201, 2119, 2	.a.o a 2.p oodo	☐ Disputed							
Who owe	s the debt? C	heck one.	Nature of lien. Check all that a	apply.						
☐ Debtor☐ Debtor	•		An agreement you made (su car loan)	ch as mortga	age or secu	ured				
_	1 and Debtor 2	only	☐ Statutory lien (such as tax lien, mechanic's lien)							
☐ At least	t one of the deb	tors and another	☐ Judgment lien from a lawsuit							
	if this claim re unity debt	lates to a	Other (including a right to off	set)						
Date debt	was incurred	Opened 6/21/18 Last Active 5/08/19	Last 4 digits of accoun	t number	5364					
-										
						A 455. =	-1			
		•	olumn A on this page. Write tha		ere:	\$411,5	61.00			
	the last page at number her	•	the dollar value totals from all p	oages.		\$411,5	61.00			

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

HIII	in this inform	ation to identify your o	case:					
Deb	otor 1	Donald Robert Ha	_					
		First Name		le Name	Last Name			
	otor 2 use if, filing)	Paula Jo Hammor		le Name	Last Name			
Оро	use II, IIIIIg)	i iist ivanie						
Unit	ted States Ban	kruptcy Court for the:	NORTHE	ERN DISTRICT OF IN	DIANA			
Cas	se number							
(if kn							☐ Check	f this is an
							amend	ed filing
~		1005/5						
	icial Form	_						
Sc	hedule E/	F: Creditors W	ho Hav	ve Unsecured	Claims			12/15
		accurate as possible. Use acts or unexpired leases						
		ory Contracts and Unexpi						
		rs Who Have Claims Secuinuation Page to this page						
	and case num		e. II you iia	ve no imormation to rep	Joit iii a Fait, uo iiot i	ne that Fart. On the ti	op of any additional p	Jages, write your
Par	t 1: List All	of Your PRIORITY Un	secured C	laims				
1.	Do any creditor	rs have priority unsecured	d claims ag	ainst you?				
	☐ No. Go to Pa	art 2.						
	Yes.							
		priority unsecured claims	. If a credito	or has more than one prio	rity unsecured claim lis	st the creditor separate	ly for each claim. For e	each claim listed
	identify what type	e of claim it is. If a claim ha	s both priori	ty and nonpriority amount	ts, list that claim here a	nd show both priority a	nd nonpriority amount	s. As much as
		claims in alphabetical orde nan one creditor holds a par				o priority unsecured cla	aims, fill out the Contin	uation Page of
		tion of each type of claim, s						
	(,,			,	Total claim	Priority	Nonpriority amount
2.1	Helene F	Pierce		Last 4 digits of accoun	nt number	Unknown	amount Unknown	Unknown
	J	ditor's Name		Last 4 digits of accoun		Olikilowii	Olikilowii	Olikilowii
	815 Elm	Street		When was the debt in	curred?			
		so, IN 46383						
		reet City State Zip Code the debt? Check one.		As of the date you file	, the claim is: Check a	all that apply		
	_			☐ Contingent				
	Debtor 1 or	nly		☐ Unliquidated				
	Debtor 2 or	nly		☐ Disputed				
	Debtor 1 ar	nd Debtor 2 only		Type of PRIORITY uns	secured claim:			
	☐ At least one	e of the debtors and anothe	r	■ Domestic support of	oligations			
	☐ Check if th	is claim is for a commun	ity debt	☐ Taxes and certain or	ther debts you owe the	government		
		ubject to offset?	iity dobt	☐ Claims for death or p	•	•		
	■ No	,		Other. Specify	, , , , , , , , , , , , , , , , , , , ,			
	☐ Yes			Cu	rrent Continuing	support obligat	ion	
						,		
2.2	Indiana	Department of Reve	nue	Last 4 digits of account	nt number	Unknown	Unknown	Unknown
	•	ditor's Name						
		fice Building oolis, IN 46204		When was the debt in	curred?			
		reet City State Zip Code		As of the date you file	, the claim is: Check a	all that apply		
		the debt? Check one.		☐ Contingent		11.7		
	Debtor 1 or	nly		☐ Unliquidated				
	Debtor 2 or	nlv		_				
	_			Disputed	nonurad alaim-			
	Debtor 1 ar	nd Debtor 2 only		Type of PRIORITY uns				
	At least one	e of the debtors and anothe	r	☐ Domestic support of	oligations			
	☐ Check if th	is claim is for a commun	ity debt	Taxes and certain or	ther debts you owe the	government		
	Is the claim su	ubject to offset?		☐ Claims for death or p	personal injury while yo	ou were intoxicated		
	■ No			Other. Specify				
	☐ Yes			· • 				

	r 1 Donald Robert Hammon r 2 Paula Jo Hammon		Case numb	er (if known)		
2.3	IRS	Last 4 digits of account number	r	\$6,000.00	\$6,000.00	\$0.00
	Priority Creditor's Name PO Box 7346 Philadelphia, PA 19101-7346	When was the debt incurred?	2015-2017			
	Number Street City State Zip Code	As of the date you file, the clain	is: Check all that	t apply		
٧	Who incurred the debt? Check one.	☐ Contingent				
[Debtor 1 only	☐ Unliquidated				
[Debtor 2 only	Disputed				
ı	Debtor 1 and Debtor 2 only	Type of PRIORITY unsecured cl	aim:			
	☐ At least one of the debtors and another	☐ Domestic support obligations				
_	☐ Check if this claim is for a community debt	■ Taxes and certain other debts	you owe the gove	rnment		
	s the claim subject to offset?	☐ Claims for death or personal in	-			
ı	No No	Other. Specify				
[☐Yes	Income Ta	axes			
un tha	st all of your nonpriority unsecured claims in the secured claim, list the creditor separately for each c an one creditor holds a particular claim, list the other art 2.	laim. For each claim listed, identify w	hat type of claim i	t is. Do not list claims	s already included in Par	rt 1. If more
					Total clai	m
4.1	Attorney Ana Osan	Last 4 digits of account num	ber			\$10,000.00
	Nonpriority Creditor's Name 55 Franklin Street Valparaiso, IN 46383	When was the debt incurred	?			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the cl	aim is: Check all t	that apply		
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsec	cured claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a report as priority claims	separation agreen	nent or divorce that y	ou did not	
	■ No	Debts to pension or profit-s	haring plans, and	other similar debts		
	Yes	Other. Specify Attorne	y's Fees			

Debtor Debtor	Donald Robert HammonPaula Jo Hammon	Case number (if known)	
4.2	Attorney Duane Hartman	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name 56 South Washington, Suite 401 Valparaiso, IN 46383	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Attorney's Fees	
4.3	Attorney Laura Wyatt	Last 4 digits of account number	\$1,000.00
	Nonpriority Creditor's Name A, 425 Sand Creek Dr N Chesterton, IN 46304	When was the debt incurred?	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	■ Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
	☐ Check if this claim is for a community	☐ Student loans	
	debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Attorney's Fees	
4.4	Attorney Ruth Norris	Last 4 digits of account number	\$5,000.00
	Nonpriority Creditor's Name 1158 W Lincolnway	When was the debt incurred?	. ,
	Valparaiso, IN 46385 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	Debtor 1 only	Поли	
		☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No.	Debts to pension or profit-sharing plans, and other similar debts	

☐ Yes

■ Other. Specify Attorney's Fees

Debtor :	Donald Robert Hammon Paula Jo Hammon		Case number (if known)	
	Attorney Scott Wagenblast Nonpriority Creditor's Name	Last 4 digits of account number		\$20,000.00
	202 Monroe Street Valparaiso, IN 46383	When was the debt incurred?		
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	■ Other. Specify Attorney's		
	AvanteUSA Ltd.	Last 4 digits of account number	5111	\$296.00
	Nonpriority Creditor's Name 3600 South Gessner Road Suite 225	When was the debt incurred?	Opened 2/13/19	
	Houston, TX 77063 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims		
	■ No	Debts to pension or profit-sharing		
	Yes			
4.7	Capital One Nonpriority Creditor's Name	Last 4 digits of account number	0005	\$2,943.00
	Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130	When was the debt incurred?	Opened 05/17 Last Active 5/31/19	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	☐ Yes	Other Specify Credit Card	I	

Debtor Debtor	1 Donald Robert Hammon 2 Paula Jo Hammon		Case number (if known)	
4.8	Capital One	Last 4 digits of account number	3378	\$1,533.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285 Salt Lake City, UT 84130 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim is	Opened 05/19 Last Active 6/14/19	V 1,000.00
	Who incurred the debt? Check one.	,	or o	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt Is the claim subject to offset?		ration agreement or divorce that you did not	
	No	report as priority claims Debts to pension or profit-sharin	a plane, and other similar debts	
	□ Yes	Other. Specify Credit Card		
4.9	Chase Card Services Nonpriority Creditor's Name	Last 4 digits of account number	3346	\$2,495.00
	Attn: Bankruptcy Po Box 15298 Wilmington, DE 19850	When was the debt incurred?	Opened 01/19 Last Active 6/02/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No No	Debts to pension or profit-sharing		
	Yes	Other. Specify Credit Card		
4.1	Citibank Nonpriority Creditor's Name	Last 4 digits of account number	5346	\$5,494.00
	Attn: Recovery/Centralized Bankruptcy Po Box 790034 St Louis, MO 63179	When was the debt incurred?	Opened 10/18 Last Active 6/12/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	\square Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	Debts to pension or profit-sharing	g plans, and other similar debts	

☐ Yes

Other. Specify Credit Card

Debtor Debtor	Donald Robert Hammon Paula Jo Hammon		Case number (if known)	
4.1 1	Comenity Bank/Overstock	Last 4 digits of account number	4637	\$1,683.00
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 08/18 Last Active 6/04/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only ☐ Debtor 2 only	☐ Contingent☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community	☐ Disputed Type of NONPRIORITY unsecured ☐ Student loans	d claim:	
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin ☐ Other. Specify Charge Acc		
4.1	Comenity Bank/Wayfair	Last 4 digits of account number	9853	\$2,181.00
	Nonpriority Creditor's Name Attn: Bankruptcy Dept Po Box 182125 Columbus, OH 43218	When was the debt incurred?	Opened 08/18 Last Active 6/01/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing		
	Yes	Other. Specify Charge Acc	count	
4.1 3	Deere Community Fed Cu Nonpriority Creditor's Name	Last 4 digits of account number	0003	\$4,069.00
	Attn: Bankruptcy Department Po Box 339 Moline, IL 61266	When was the debt incurred?	Opened 6/29/18 Last Active 5/10/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
	☐ Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	No	☐ Debts to pension or profit-sharin	g plans, and other similar debts	
	☐ Yes	Other. Specify Unsecured		

Debtor Debtor	1 Donald Robert Hammon 2 Paula Jo Hammon		Case number (if known)	
4.1 4	Dept of Ed / Navient	Last 4 digits of account number	0410	\$13,314.00
	Nonpriority Creditor's Name Attn: Claims Dept Po Box 9635 Wilkes Barr, PA 18773	When was the debt incurred?	Opened 04/17 Last Active 5/13/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	□ Debtor 1 only ■ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured ■ Student loans	d claim:	
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	☐ Debts to pension or profit-sharin☐ Other. Specify	g plans, and other similar debts	
		Educationa	ıl	
4.1 5	Service Merchandise/Samuels Jewelry Nonpriority Creditor's Name	Last 4 digits of account number	1346	\$869.00
	Attn: Bankruptcy Po Box 182273 Columbus, OH 43218	When was the debt incurred?	Opened 08/17 Last Active 5/18/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	■ Debtor 1 only □ Debtor 2 only □ Debtor 1 and Debtor 2 only □ At least one of the debtors and another	☐ Contingent ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured	մ claim։	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No □ Yes	□ Debts to pension or profit-sharin ■ Other. Specify Charge Acc		
4.1	Synchrony Bank/ JC Penneys Nonpriority Creditor's Name	Last 4 digits of account number	5553	\$2,064.00
	Attn: Bankruptcy Po Box 956060 Orlando, FL 32896	When was the debt incurred?	Opened 8/05/18 Last Active 5/08/19	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	■ Debtor 1 and Debtor 2 only	☐ Disputed		
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims	malana and atherasinates to the	
	■ No	☐ Debts to pension or profit-sharin		
	Yes	■ Other. Specify Charge Acc	count	

Paula Jo Hammon	Case number (if known)				
Synchrony/Ashley Furniture Homestore	Last 4 digits of account number	7603	\$302.0		
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 11/20/18 Last Active 5/10/19			
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
No	Debts to pension or profit-sharing				
Yes	Other. Specify Charge Acc	count			
Wakefield & Associates	Last 4 digits of account number	0S01	\$861.		
Nonpriority Creditor's Name Attn: Bankruptcy 10800 E Bethany Dr	When was the debt incurred?	Opened 03/19	·		
Aurora, CO 80014 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
■ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	Debts to pension or profit-sharing				
Yes	Other. Specify Collection				
Wells Fargo Jewelry Advantage	Last 4 digits of account number	2480	\$2,055.		
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10438	When was the debt incurred?	Opened 3/15/19 Last Active 5/24/19			
Des Moines, IA 50306 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
☐ Debtor 2 only	☐ Unliquidated				
■ Debtor 1 and Debtor 2 only	☐ Disputed				
\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
☐ Check if this claim is for a community debt		ration agreement or divorce that you did not			
Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharir	g plans, and other similar debts			

Part 3: List Others to Be Notified About a Debt That You Already Listed

Debtor 1	Donald Robert Hammon
Dehtor 2	Paula la Hammon

Case number (if known)

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.

				Total Claim
	6a.	Domestic support obligations	6a.	\$ 0.00
Total claims				
from Part 1	6b.	Taxes and certain other debts you owe the government	6b.	\$ 6,000.00
	6c.	Claims for death or personal injury while you were intoxicated	6c.	\$ 0.00
	6d.	Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$ 0.00
	6e.	Total Priority. Add lines 6a through 6d.	6e.	\$ 6,000.00
				Total Claim
	6f.	Student loans	6f.	\$ 13,314.00
Total claims				
from Part 2	6g.	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$ 0.00
	6h.	Debts to pension or profit-sharing plans, and other similar debts	6h.	\$ 0.00
	6i.	Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$ 63,845.00
	6j.	Total Nonpriority. Add lines 6f through 6i.	6j.	\$ 77,159.00

Fill in this infor	mation to identify your	case:		
Debtor 1	Donald Robert Ha	ammon		
	First Name	Middle Name	Last Name	
Debtor 2	Paula Jo Hammo	n		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	NORTHERN DISTRICT	OF INDIANA	
Case number _				☐ Check if this is an amended filing

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Tyes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ı	Person or	company with	whom you have the r, Street, City, State and ZIF	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			_
	City		State	ZIP Code	<u> </u>
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	,				
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.4	,				
	Name				<u> </u>
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>
2.5	,		<u> </u>	2 0000	
	Name				_
	Number	Street			<u> </u>
	City		State	ZIP Code	<u> </u>

Fill in this int					
	formation to identify your				
Debtor 1	Donald Robert Ha	Ammon Middle Name	Last Name		
Debtor 2	Paula Jo Hammo		<u> </u>		
(Spouse if, filing)	First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	NORTHERN DISTRICT	Γ OF INDIANA		
Case number					
(if known)					☐ Check if this is an
					amended filing
7ff: a: a [- arm 10011				
	Form 106H	•			
<u>3chedu</u>	le H: Your Cod	ebtors			12/15
	nd case number (if known) u have any codebtors? (If			as a codebtor.	
■ No □ Yes					
_ 103					
	the last 8 years, have you California, Idaho, Louisiana,				states and territories include
■ No. Go	o to line 3.				
_	id your spouse, former spou	use, or legal equivalent liv	e with you at the time?		
— 100. D	na your opouco, ronnor opoc	soo, or logal oquivalent liv	o mar you at are arre.		
in line 2 : Form 100 out Colu	again as a codebtor only i 6D), Schedule E/F (Official	f that person is a guarar	ntor or cosigner. Make	sure you have listed the 16G). Use Schedule D, So	with you. List the person shown creditor on Schedule D (Officia chedule E/F, or Schedule G to fi itor to whom you owe the debt
	ne, Number, Street, City, State and ZI	P Code		Check all schedules	
0.4				Пол. 1.1 В 11	
3.1 Nan	ne			_ ☐ Schedule D, line	
				☐ Schedule E/F, line☐ Schedule G, line☐	e
				_ Scriedule G, line	
Nun City		State	ZIP Code		
City		State	ZIF Code		
				Па ::	
3.2 Nan	ne			Schedule D, line	
1 VOII	·· ·			☐ Schedule E/F, line☐ Schedule G, line	
				— Scriedule G, line	
Nun City		State	ZIP Code		
Oity		00	0000		

Deb	tor 1 Donald F	obert Hammon		_
	tor 2 Paula Jouse, if filing)	Hammon		-
Unit	ed States Bankruptcy Court fo	the: NORTHERN DISTRIC	CT OF INDIANA	_
(If kn	e number own)		-	Check if this is: An amended filing A supplement showing postpetition chapter 13 income as of the following date:
<u>O</u> 1	ficial Form 106I			MM / DD/ YYYY
So	hedule I: Your II	come		12/15
attad	ch a separate sheet to this fo	m. On the top of any additi	ional pages, write your name a	and case number (if known). Answer every question.
Par 1.	Fill in your employment	ent	Dahtand	Dahtan Gannan Glinn anawa
Par	Fill in your employment information.		Debtor 1	Debtor 2 or non-filing spouse
Par	Fill in your employment		Debtor 1 ■ Employed □ Not employed	Debtor 2 or non-filing spouse ■ Employed □ Not employed
Par	Fill in your employment information. If you have more than one job attach a separate page with		■ Employed	■ Employed
Par	Fill in your employment information. If you have more than one job attach a separate page with information about additional	Employment status Occupation	■ Employed □ Not employed	■ Employed □ Not employed
Par	Fill in your employment information. If you have more than one job attach a separate page with information about additional employers. Include part-time, seasonal, or	Employment status Occupation Employer's name	■ Employed □ Not employed Systems Repairs	■ Employed □ Not employed Registered Nurse
Par	Fill in your employment information. If you have more than one job attach a separate page with information about additional employers. Include part-time, seasonal, conself-employed work. Occupation may include student	Employment status Occupation Employer's name	■ Employed □ Not employed Systems Repairs US Steel 1 Broadway Gary, IN 46402	■ Employed □ Not employed Registered Nurse Trilogy Health Services 303 N Hurstbourne Parkway, Suite
Par	Fill in your employment information. If you have more than one job attach a separate page with information about additional employers. Include part-time, seasonal, of self-employed work. Occupation may include studior homemaker, if it applies.	Employment status Occupation Employer's name Employer's address How long employed t	■ Employed □ Not employed Systems Repairs US Steel 1 Broadway Gary, IN 46402	■ Employed □ Not employed Registered Nurse Trilogy Health Services 303 N Hurstbourne Parkway, Suite 200 Louisville, KY 40222

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. 2. Estimate and list monthly overtime pay. Calculate gross Income. Add line 2 + line 3.

2.	\$_	11,018.00	\$	4,831.00
3.	+\$_	0.00	+\$_	0.00
4.	\$_	11,018.00	\$_	4,831.00

non-filing spouse

Casa	number	(if known
Case	number	(IT KNOWI

				For	Debtor 1		Debtor 2 or filing spouse	
	Copy	y line 4 here	4.	\$	11,018.00	\$	4,831.00	
5.	List a	all payroll deductions:						
	5a.	Tax, Medicare, and Social Security deductions	5a.	\$	2,629.00	\$	928.00	
	5b.	Mandatory contributions for retirement plans	5b.	\$	0.00	\$	0.00	
	5c.	Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00	
	5d.	Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00	
	5e.	Insurance	5e.	\$	0.00	\$	147.00	
	5f.	Domestic support obligations	5f.	\$	0.00	\$	0.00	
	5g.	Union dues	5g.	\$	132.00	\$	0.00	
	5h.	Other deductions. Specify:	5h	+ \$_	0.00	+ \$	0.00	
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.	\$_	2,761.00	\$	1,075.00	
7.	Calc	ulate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$_	8,257.00	\$	3,756.00	
8.	List a 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00	
	8b.	Interest and dividends	8b.	\$	0.00	\$	0.00	
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		\$	0.00	\$	0.00	
	8d.	Unemployment compensation	8d.	\$	0.00	\$	0.00	
	8e.	Social Security	8e.	\$	0.00	\$	0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:	e 8f.	\$_	0.00	\$	0.00	
	8g.	Pension or retirement income	8g.	\$	0.00	\$	0.00	
	8h.	Other monthly income. Specify:	_ 8h	+ \$_	0.00	+ \$	0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	0.00	\$	0.00	
10.		ulate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$		8,257.00 + \$	3,7	56.00 = \$ 1	2,013.00
11.	State Include other	e all other regular contributions to the expenses that you list in Schedule de contributions from an unmarried partner, members of your household, your friends or relatives. ot include any amounts already included in lines 2-10 or amounts that are not	deper				chedule J. 11. +\$	0.00
12.		the amount in the last column of line 10 to the amount in line 11. The reset that amount on the Summary of Schedules and Statistical Summary of Certaines					12. \$ 1	2,013.00
							Combin	ed income
13.	Do y	ou expect an increase or decrease within the year after you file this form	?					
		No.						
		Yes. Explain:						

Fill	in this information	on to identify you	ur case:						
Deb	otor 1	Donald Robe	rt Hamm	on		Check if this is:			
D-1							An amended filing	dan a sala attita a abaadaa	
	otor 2 ouse, if filing)	Paula Jo Han	nmon				13 expenses as of	ving postpetition chapter the following date:	
Unit	ted States Bankru	ptcy Court for the:	NORTH	ERN DISTRICT OF INDIA	NA		MM / DD / YYYY		
	e number nown)								
O	fficial For	m 106J							
S	chedule	J: Your E	Expen	ses				12/1	
Be info	as complete ar ormation. If mo mber (if known	nd accurate as	possible. eded, attac y question	If two married people ar ch another sheet to this					
1 ai	Is this a joint		ioiu						
	☐ No. Go to I	line 2.							
			n a separa	te household?					
	■ No □ Yes		t file Officia	al Form 106J-2, <i>Expenses</i>	for Separate House	<i>hold</i> of Del	otor 2.		
2.	Do you have	dependents?	□ No						
	Do not list Del Debtor 2.	btor 1 and	■ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Dependent's age	Does dependent live with you?	
	Do not state th							□ No	
	dependents n	ames.			Grandson		5 months	■ Yes □ No	
					Son		8	■ Yes	
								■ No	
					Son		14	Yes	
					Daughter		23	□ No ■ Yes	
3.	expenses of	enses include people other th your depender	an _	No Yes	Daughter			■ Yes	
Est	imate your exp		ur bankru	y Expenses iptcy filing date unless y y is filed. If this is a supp					
the		assistance and		government assistance i luded it on <i>Schedule I:</i> \			Your exp	enses	
4.		home ownersh any rent for the		ses for your residence. I r lot.	nclude first mortgage	4.	\$	0.00	
	If not include	ed in line 4:							
	4a. Real es	state taxes				4a.	\$	0.00	
		y, homeowner's	, or renter'	s insurance		4b.	·	0.00	
		naintenance, rep		pkeep expenses		4c. 4d	\$	100.00	

0.00

Additional mortgage payments for your residence, such as home equity loans

Debtor 1 Debtor 2		Case num	ber (if known)	
6. Util	ities:			
o. Util 6a.	Electricity, heat, natural gas	6a.	\$	370.00
6b.	Water, sewer, garbage collection	6b.		33.00
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c.	· ·	639.00
6d.	Other. Specify:	6d.		0.00
	od and housekeeping supplies	7.	·	1,500.00
	Idcare and children's education costs	8.	· -	400.00
	thing, laundry, and dry cleaning	9.	· -	100.00
	sonal care products and services	10.	·	100.00
	dical and dental expenses	11.	· -	200.00
	nsportation. Include gas, maintenance, bus or train fare.		<u> </u>	200.00
	not include car payments.	12.	\$	400.00
	ertainment, clubs, recreation, newspapers, magazines, and books	13.	\$	100.00
4. Cha	aritable contributions and religious donations	14.	\$	100.00
5. Ins	urance.			
	not include insurance deducted from your pay or included in lines 4 or 20.		_	
	. Life insurance	15a.		0.00
15b	. Health insurance	15b.	\$	0.00
15c	. Vehicle insurance	15c.	\$	300.00
15d	l. Other insurance. Specify:	15d.	\$	0.00
	res. Do not include taxes deducted from your pay or included in lines 4 or 20. ecify:	16.	\$	0.00
	tallment or lease payments:		-	
	. Car payments for Vehicle 1	17a.	·	0.00
17b	. Car payments for Vehicle 2	17b.	\$	0.00
17c	. Other. Specify:	17c.	\$	0.00
17d	l. Other. Specify:	17d.	\$	0.00
	ur payments of alimony, maintenance, and support that you did not report a		•	0.00
	lucted from your pay on line 5, Schedule I, Your Income (Official Form 106I)). 18.	· -	0.00
	er payments you make to support others who do not live with you.		\$	0.00
	ecify:	19.		
	ner real property expenses not included in lines 4 or 5 of this form or on Sci			0.00
	. Mortgages on other property	20a. 20b.		0.00
	Real estate taxes			0.00
	Property, homeowner's, or renter's insurance	20c.	·	0.00
	l. Maintenance, repair, and upkeep expenses	20d.	· -	0.00
	Homeowner's association or condominium dues	20e.	·	0.00
. Oth	er: Specify: Diapers and wipes	21.	+\$	100.00
	culate your monthly expenses			
	. Add lines 4 through 21.		\$	4,442.00
22b	. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
220	Add line 22a and 22b. The result is your monthly expenses.		\$	4,442.00
3. Cal	culate your monthly net income.		L	
	Copy line 12 (your combined monthly income) from Schedule I.	23a.	\$	12,013.00
	Copy your monthly expenses from line 22c above.	23b.		4,442.00
	177			.,
230	Subtract your monthly expenses from your monthly income.			7 574 00
	The result is your monthly net income.	23c.	\$	7,571.00
For mod	you expect an increase or decrease in your expenses within the year after example, do you expect to finish paying for your car loan within the year or do you expect you fifted at the terms of your mortgage?			ease or decrease because o
□,	Yes Explain here:			

Fill in thi	s information to identify your ca	Sex	
Debtor 1	Donald Robert Han First Name	Middle Name Last Name	
Debtor 2	Paula Jo Hammon		
(Spouse if, fi		Middle Name Last Name	
United St	ates Bankruptcy Court for the:	NORTHERN DISTRICT OF INDIANA	
Case nun	nher		
(if known)			☐ Check if this is an
			amended filing
	Form 106Dec aration About ar	Individual Debtor's Schedu	iles 12/15
	both. 18 U.S.C. §§ 152, 1341, 15	onnection with a bankruptcy case can result in fines up 9, and 3571.	o to \$250,000, or imprisonment for up to 20
Did	you pay or agree to pay someor	e who is NOT an attorney to help you fill out bankruptc	y forms?
•	No		
П	Yes. Name of person		Attach Bankruptcy Petition Preparer's Notice,
_			Declaration, and Signature (Official Form 119)
	er penalty of perjury, I declare the they are true and correct.	at I have read the summary and schedules filed with this	s declaration and
	s/ Donald Robert Hammon	X /s/ Paula Jo Hamme	on
_	Donald Robert Hammon	Paula Jo Hammon	
;	Signature of Debtor 1	Signature of Debtor 2	

Fill in	this inform	nation to identify you	r case:			
Debto		Donald Robert H				
		First Name	Middle Name	Last Name		
Debto (Spouse	or 2 e if, filing)	Paula Jo Hammo	Middle Name	Last Name		
United	d States Bar	nkruptcy Court for the:	NORTHERN DISTRICT (OF INDIANA		
Casa	number					
(if know	_				_	Check if this is an mended filing
Ott:	aial Eac	107				
		rm 107 of Financial	Affairs for Indivi	duals Filing for B	ankruptcy	4/19
inform	ation. If m	ore space is needed,	attach a separate sheet to		equally responsible for sup y additional pages, write you	
Part 1		n). Answer every que: Petails About Your Ma	ธนอก. arital Status and Where You	ı Lived Before		
1. W	/hat is your	r current marital statu	ıs?			
•	Married Not mar	ried				
2. D			lived anywhere other than	where vou live now?		
	_	,,	,			
Ē	■ No I Yes. Lis	t all of the places you l	ived in the last 3 years. Do n	ot include where you live nov	I.	
[Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ac	dress:	Dates Debtor 2 lived there
					ity property state or territory ico, Texas, Washington and W	
	No			* ***********************************		
L	J Yes. Ma	ike sure you fill out <i>Scl</i>	hedule H: Your Codebtors (O	fficial Form 106H).		
Part 2	Explai	n the Sources of You	r Income			
F	ill in the tota	l amount of income yo	nployment or from operating ureceived from all jobs and a have income that you receive	all businesses, including part		ndar years?
] No					
	Yes. Fill	in the details.				
			Debtor 1		Debtor 2	
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
			■ Wages, commissions, bonuses, tips	\$57,161.00	■ Wages, commissions, bonuses, tips	\$15,744.00
			☐ Operating a business		☐ Operating a business	

Official Form 107

			Debtor 1			Debtor 2		
		Sources of income Check all that apply.		income e deductions and ions)	Sources of inc		Gross income (before deductions and exclusions)	
	lendar year: to December	31, 2018)	■ Wages, commissions, bonuses, tips		\$116,155.00	■ Wages, combonuses, tips	nmissions,	\$44,974.00
			☐ Operating a business			☐ Operating a	business	
	endar year be to December		■ Wages, commissions, bonuses, tips		\$101,137.00	■ Wages, combonuses, tips	nmissions,	\$47,810.00
			☐ Operating a business			☐ Operating a	business	
Include and oth winning List eac	income regard ner public bene gs. If you are fil ch source and	dless of wheth fit payments; ing a joint cas the gross inco	e during this year or the two er that income is taxable. Exa pensions; rental income; inter e and you have income that y me from each source separar	amples of rest; divid you receiv	other income are a ends; money collec- red together, list it	alimony; child supported from lawsuits; only once under De	royalties; an ebtor 1.	
			Debtor 1 Sources of income Describe below.	each s	income from source e deductions and ions)	Debtor 2 Sources of inc Describe below		Gross income (before deductions and exclusions)
	ary 1 of curre ou filed for ba				\$0.00	Short-term D	isability	\$2,340.00
	lendar year: to December	31, 2018)			\$0.00	pensions/an	nuities	\$6,394.00
					\$0.00	Short-term D	isability	\$2,340.00
Part 3:	ist Cartain Ba	avments Vou	Made Before You Filed for	Bankrunt	iev			
6. Are eit	her Debtor 1's	s or Debtor 2' ebtor 1 nor D	s debts primarily consumer ebtor 2 has primarily consu- personal, family, or househol	r debts? umer deb	ts. Consumer deb	ts are defined in 11	U.S.C. § 10	01(8) as "incurred by an
	During the	90 days befo	re you filed for bankruptcy, di	id you pay	any creditor a tota	al of \$6,825* or mo	re?	
	□ Yes	List below e	each creditor to whom you pai editor. Do not include paymer payments to an attorney for th	nts for dor	nestic support obli			
	* Subject		on 4/01/22 and every 3 years			or after the date of	of adjustment	t.
■ Ye			r both have primarily consure you filed for bankruptcy, di			al of \$600 or more?	?	
	■ No.	Go to line 7						
	☐ Yes	include pay	each creditor to whom you pai ments for domestic support of this bankruptcy case.					
Credit	tor's Name an	d Address	Dates of payme	ent	Total amount paid	Amount you still owe	Was this	payment for
					pulu	J.III 0116		

Debtor 1 Debtor 2 Debtor 2 Debtor 2 Debtor 2				Cas	se number (if kno	wn)		
7.	Inside of whi	n 1 year before you filed for bankrupters include your relatives; any general paich you are an officer, director, person in iness you operate as a sole proprietor. 1 ny.	artners; relatives of any ge control, or owner of 20%	neral partners; partners or more of their voting	erships of which g securities; and	you are a gene d any managing	ral partner; corporations agent, including one for	
	_	No						
		Yes. List all payments to an insider.	5				4.	
	insic	der's Name and Address	Dates of payment	Total amount paid	Amount you still ow		r this payment	
В.	inside	n 1 year before you filed for bankrupt er? de payments on debts guaranteed or cos		yments or transfer a	any property o	n account of a o	debt that benefited an	
		No						
		Yes. List all payments to an insider						
	Insid	der's Name and Address	Dates of payment	Total amount paid	Amount you		r this payment ditor's name	
D-1		Identify I and Actions Democracia		para	Olin Oliv	inolado oro	and o hamo	
Par	t 4:	Identify Legal Actions, Repossession	ns, and Foreclosures					
9.	List al	n 1 year before you filed for bankrupt Il such matters, including personal injury ications, and contract disputes.						
		No						
	_	Yes. Fill in the details.						
		e title e number	Nature of the case	Court or agency		Status of t	he case	
	HAN	NALD HAMMON, PAULA MMON vs Unknown Defendant 2548	Bankruptcy Chapter 13	INDIANA NORT HAMMOND	INDIANA NORTHERN - HAMMOND		g eal ded	
						Discharg	ed - 0.00	
	HAN	NALD HAMMON, PAULA MMON vs Unknown Defendant 2548	Bankruptcy Chapter 13	INDIANA NORTHERN - HAMMOND		☐ Pendin ☐ On app ☐ Conclu	eal	
						Discharg	ed - 0.00	
	Hele	ene Hammon	Divorce	Porter Superio		☐ Pendin	•	
	Don	nie Hammon 02-0501-DR-000584			i Lincolnway Alparaiso, IN 46383		☐ On appeal ☐ Concluded	
10.		n 1 year before you filed for bankrupt k all that apply and fill in the details belo		perty repossessed, f	oreclosed, gar	nished, attache	ed, seized, or levied?	
	_	No. Go to line 11. Yes. Fill in the information below.						
	_	litor Name and Address	Describe the Property		Da	ite	Value of the	
			Explain what happene				property	
			_xpiaiii iiilat iiappeiie	-				

	otor 2	Paula Jo Hammon		Case	e number (if	known)	
11.	acco	n 90 days before you filed for bank unts or refuse to make a payment b No		lid any creditor, including a bank or fina you owed a debt?	ancial insti	itution, set off any a	mounts from your
	□ `	Yes. Fill in the details.					
	Cred	litor Name and Address	Des	cribe the action the creditor took		Date action was taken	Amount
12.		n 1 year before you filed for bankru -appointed receiver, a custodian, o		s any of your property in the possession official?	on of an as	signee for the bene	efit of creditors, a
	_	No Yes					
Par		List Certain Gifts and Contribution	ns				
				id you give any gifts with a total value o	of more the	on \$600 per person	.
13.	_	n z years berore you med for banki No	upicy, a	iu you give any gins with a total value t	or more ma	in sooo per person	•
		Yes. Fill in the details for each gift.					
		s with a total value of more than \$60 person	00	Describe the gifts		Dates you gave the gifts	Value
		son to Whom You Gave the Gift and ress:					
14.		in 2 years before you filed for bankr No Yes. Fill in the details for each gift or c		id you give any gifts or contributions w	rith a total	value of more than	\$600 to any charity?
	more Chai	s or contributions to charities that the than \$600 rity's Name ress (Number, Street, City, State and ZIP Cod.		Describe what you contributed		Dates you contributed	Value
Par		List Certain Losses					
	Withi		iptcy or s	since you filed for bankruptcy, did you	lose anyth	ing because of thef	t, fire, other disaster
		No					
	Ц,	Yes. Fill in the details.					
		cribe the property you lost and the loss occurred	Include	pe any insurance coverage for the loss the amount that insurance has paid. List p ce claims on line 33 of Schedule A/B: Prop		Date of your loss	Value of property lost
Par	t 7:	List Certain Payments or Transfers	s				
16.	cons	ulted about seeking bankruptcy or	preparin	d you or anyone else acting on your belg a bankruptcy petition?			rty to anyone you
		No	·		·		
	_	Yes. Fill in the details.					
	Add	il or website address		Description and value of any property transferred		Date payment or transfer was made	Amount of payment
	Law Hire 6 W Mer	on Who Made the Payment, if Not \ Office of Weiss, Schmidgall & es, est 73rd Ave rillville, IN 46410 kruptcy@wshlegal.com	rou	Attorney Fees			\$500.00

17.	Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that you li No	or to make payments			r transfer any proper	ty to anyone who
	Yes. Fill in the details.					
	Person Who Was Paid Address	Description and va transferred	alue of any prop	erty	Date payment or transfer was made	Amount of payment
18	Within 2 years before you filed for bankruptcy	v. did vou sell. trade. or	otherwise trans	sfer any prop	erty to anyone, other	than property
10.	transferred in the ordinary course of your bust Include both outright transfers and transfers made include gifts and transfers that you have already I No Yes. Fill in the details.	siness or financial affair e as security (such as th	rs?			
	Person Who Received Transfer	Description and va	due of	Deceribe	any proporty or	Data transfer was
	Address	Description and va property transferre			any property or received or debts change	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankrupto beneficiary? (These are often called asset-prote		property to a s	elf-settled tru	st or similar device o	f which you are a
	Yes. Fill in the details.					
	Name of trust	Description and va	llue of the prope	erty transferre	ed	Date Transfer was made
Par	8: List of Certain Financial Accounts, Instr	ruments, Safe Deposit	Boxes, and Stor	rage Units		
20. Within 1 year before you filed for bankruptcy, were any financial accounts sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; cer houses, pension funds, cooperatives, associations, and other financial ins ■ No □ Yes. Fill in the details.				of deposit; sh		
		ast 4 digits of account number	Type of account instrument	clo mo	te account was sed, sold, ved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 yea	ar before you filed for	bankruptcy, any	safe deposit	box or other deposit	ory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acce Address (Number, State and ZIP Code)		Describe the o	contents	Do you still have it?
22.	Have you stored property in a storage unit or	place other than your	home within 1 y	ear before yo	u filed for bankruptcy	/?
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or hat to it? Address (Number, State and ZIP Code)		Describe the o	contents	Do you still have it?
		•				

Par	t 9: Identify Property You Hold or Control for	Someone Else				
23.	Do you hold or control any property that someofor someone.	one else owns? Include any proper	rty yo	u borrowed from, are storing fo	r, or hold in trust	
	■ No □ Yes. Fill in the details.					
	☐ Yes. Fill in the details. Owner's Name Address (Number, Street, City, State and ZIP Code)	Where is the property? (Number, Street, City, State and ZIP Code)	Des	cribe the property	Value	
Par	t 10: Give Details About Environmental Inform	,				
	the purpose of Part 10, the following definitions					
FOI	the purpose of Fart 10, the following definitions	арріу.				
	Environmental law means any federal, state, or toxic substances, wastes, or material into the a regulations controlling the cleanup of these sul	ir, land, soil, surface water, ground				
	Site means any location, facility, or property as to own, operate, or utilize it, including disposal	sites.				
	Hazardous material means anything an environ hazardous material, pollutant, contaminant, or s		s was	te, hazardous substance, toxic	substance,	
Rep	ort all notices, releases, and proceedings that ye	ou know about, regardless of wher	n they	occurred.		
24.	Has any governmental unit notified you that you	u may be liable or potentially liable	e unde	er or in violation of an environm	ental law?	
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice	
25.	Have you notified any governmental unit of any	release of hazardous material?				
	■ No □ Yes. Fill in the details.					
	Name of site Address (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)		Environmental law, if you know it	Date of notice	
26.	Have you been a party in any judicial or adminis	strative proceeding under any env	ironm	ental law? Include settlements	and orders.	
	■ No □ Yes. Fill in the details.					
	Case Title Case Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Nati	ure of the case	Status of the case	
Par	t 11: Give Details About Your Business or Con	nections to Any Business				
27	Within 4 years before you filed for bankruptcy,	•	ny of t	the following connections to an	v husiness?	
	☐ A sole proprietor or self-employed in a	•	•	J	, 200000 .	
	☐ A member of a limited liability company (LLC) or limited liability partnership (LLP)					
	☐ A partner in a partnership	•••				
		tive of a corporation				
	☐ An owner of at least 5% of the voting or	equity securities of a corporation				

Debtor 1	Donald Robert Hammon
Debtor 2	Paula Jo Hammon

Case number (if known)

	No. None of the above applies. Go to Part 12.						
	☐ Yes. Check all that apply above and fill in the details below for each business.						
	Business Name Address (Number, Street, City, State and ZIP Code)	Describe the nature of the business Name of accountant or bookkeeper	Employer Identification number Do not include Social Security number or ITIN. Dates business existed				
28.	Within 2 years before you filed for bankrupt institutions, creditors, or other parties.	Vithin 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial nstitutions, creditors, or other parties.					
	■ No □ Yes. Fill in the details below.						
	Name Address (Number, Street, City, State and ZIP Code)	Date Issued					

Debtor 1	Donald Robert Hammon				
Debtor 2	Paula Jo Hammon			Case number (if known)	
Part 12:	Sign Below				
I have rea	d the answers on this Statement of Financia	al Affairs a	nd any attachments	, and I declare under penal	y of perjury that the answers
	nd correct. I understand that making a false				
	hkruptcy case can result in fines up to \$250,	000, or im	prisonment for up to	o 20 years, or both.	
18 U.S.C.	§§ 152, 1341, 1519, and 3571.				
/s/ Dona	ıld Robert Hammon	/s/ Pa	ula Jo Hammon		
Donald	Robert Hammon	Paula Jo Hammon			
Signature	e of Debtor 1	Signature of Debtor 2			
Date Ju	une 27, 2019	Date	June 27, 2019		
Did you at	ttach additional pages to Your Statement of	Financial	Affairs for Individua	als Filing for Bankruptcy (Ol	ficial Form 107)?
■ No	. •				,
☐ Yes					
Did you pa	ay or agree to pay someone who is not an a	ttorney to	help you fill out ban	kruptcy forms?	
■ No		-			

☐ Yes. Name of Person _____. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:	Liquidation
\$245	filing fee
\$75	administrative fee
<u>+</u> \$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft;

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes.

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

United States Bankruptcy Court Northern District of Indiana

	Northe	ern District of Indian	ıa				
In r	Donald Robert Hammon		Case No				
111 1	Paula Jo Hammon	Debtor(s)	Case No	13			
	DIGGLOGUDE OF COMPENS		DNEW EOD F	EDEOD (C)			
	DISCLOSURE OF COMPENS	ATION OF ATTO	KNEY FOR L	PEBIOR(S)			
1.	Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of or	f the petition in bankruptcy	y, or agreed to be pa	d to me, for services render	red or to		
	For legal services, I have agreed to accept		\$	4,000.00			
	Prior to the filing of this statement I have received		\$	500.00			
	Balance Due		\$	3,500.00			
2.	The source of the compensation paid to me was:						
	■ Debtor □ Other (specify):						
3.	The source of compensation to be paid to me is:						
	■ Debtor □ Other (specify):						
4.	■ I have not agreed to share the above-disclosed compensation	ation with any other person	n unless they are me	mbers and associates of my	law firm.		
	☐ I have agreed to share the above-disclosed compensation copy of the agreement, together with a list of the names				irm. A		
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:						
	 a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, stateme c. Representation of the debtor at the meeting of creditors at d. [Other provisions as needed] Negotiations with secured creditors to redure affirmation agreements and applications 	ent of affairs and plan which and confirmation hearing, a uce to market value; ex	ch may be required; and any adjourned h	earings thereof;			
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following service: Representation of the debtors in any dischargeability actions, judicial lien avoidances, relief from stay actions or any other adversary proceeding.						
	C	CERTIFICATION					
this	I certify that the foregoing is a complete statement of any agbankruptcy proceeding.	greement or arrangement for	or payment to me for	representation of the debto	r(s) in		
_,	June 27, 2019	/s/ Christopher S					
<u> </u>	Date	Christopher Sch Signature of Attorn Law Office of W	aey eiss, Schmidgall	& Hires, P.C.			

Merrillville, IN 46410

Name of law firm

(219)736-5297 Fax: (219)769-5297 bankruptcy@wshlegal.com

(6/2010)

United States Bankruptcy Court Northern District of Indiana

In re	Donald Robert Hammon Paula Jo Hammon		Case No.	
		Debtor(s)	Chapter	13
		ICATION OF CREDITOR er penalty of perjury that the attached lis		e and correct to the best of
Date:	June 27, 2019	/s/ Donald Robert Hammon Donald Robert Hammon Signature of Debtor		
Date:	June 27, 2019	/s/ Paula Jo Hammon Paula Jo Hammon		

Signature of Debtor

ATTORNEY ANA OSAN 55 FRANKLIN STREET VALPARAISO, IN 46383

ATTORNEY DUANE HARTMAN 56 SOUTH WASHINGTON, SUITE 401 VALPARAISO, IN 46383

ATTORNEY LAURA WYATT A, 425 SAND CREEK DR N CHESTERTON, IN 46304

ATTORNEY RUTH NORRIS 1158 W LINCOLNWAY VALPARAISO, IN 46385

ATTORNEY SCOTT WAGENBLAST 202 MONROE STREET VALPARAISO, IN 46383

AVANTEUSA LTD.
3600 SOUTH GESSNER ROAD
SUITE 225
HOUSTON, TX 77063

CAPITAL ONE ATTN: BANKRUPTCY PO BOX 30285 SALT LAKE CITY, UT 84130

CARMAX AUTO FINANCE ATTN: BANKRUPTCY PO BOX 440609 KENNESAW, GA 30160

CHASE CARD SERVICES ATTN: BANKRUPTCY PO BOX 15298 WILMINGTON, DE 19850 CITIBANK

ATTN: RECOVERY/CENTRALIZED BANKRUPTCY

PO BOX 790034

ST LOUIS, MO 63179

COMENITY BANK/OVERSTOCK ATTN: BANKRUPTCY PO BOX 182125 COLUMBUS, OH 43218

COMENITY BANK/WAYFAIR ATTN: BANKRUPTCY DEPT PO BOX 182125 COLUMBUS, OH 43218

DEERE COMMUNITY FED CU ATTN: BANKRUPTCY DEPARTMENT PO BOX 339 MOLINE, IL 61266

DEPT OF ED / NAVIENT ATTN: CLAIMS DEPT PO BOX 9635 WILKES BARR, PA 18773

FIRST COMMUNITY/ DEERE COMMUNITY FED CU ATTN: BANKRUPTCY DEPARTMENT PO BOX 339 MOLINE, IL 61266

HELENE PIERCE 815 ELM STREET VALPARAISO, IN 46383

HOME POINT FINANCIAL CORPORATION ATTN: CORRESPONDENCE DEPT 11511 LUNA ROAD; SUITE 200 FARMERS BRANCH, TX 75234

INDIANA DEPARTMENT OF REVENUE STATE OFFICE BUILDING INDIANAPOLIS, IN 46204

IRS
PO BOX 7346
PHILADELPHIA, PA 19101-7346

SERVICE MERCHANDISE/SAMUELS JEWELRY ATTN: BANKRUPTCY PO BOX 182273 COLUMBUS, OH 43218

SYNCHRONY BANK/ JC PENNEYS ATTN: BANKRUPTCY PO BOX 956060 ORLANDO, FL 32896

SYNCHRONY/ASHLEY FURNITURE HOMESTORE ATTN: BANKRUPTCY PO BOX 965060 ORLANDO, FL 32896

WAKEFIELD & ASSOCIATES ATTN: BANKRUPTCY 10800 E BETHANY DR AURORA, CO 80014

WELLS FARGO JEWELRY ADVANTAGE ATTN: BANKRUPTCY PO BOX 10438 DES MOINES, IA 50306